AIDS and IgA Nephropathy

S.	Sabine	Kenouch
J.-P.	Jean-Philippe	Méry

Department of Nephrology, Hôpital Bichat, Paris, France

Sabine Kenouch, MD, Department of Nephrology, Hôpital Bichat, 46, rue Henri Huchard, F-75018 Paris (France)

Sir,

We read with interest the letter of Béné et al. [1]. Based upon the absence of IgA deposits in all but one autopsy specimens of kidney from 54 AIDS patients the authors express the opinion that the presence of IgA mesangial deposits in the 2 patients with AIDS-related complex we reported in 1990 [2] was purely coincidental. In their opinion, these patients were suffering from IgA nephropathy (IgAN) not related to HIV infection. Though the occurrence of two unrelated diseases cannot be excluded, we would like to stress that since our paper was published we have observed 1 additional case of IgAN in a patient with overt AIDS. Five other cases have been published. 4 by Bargman et al. [3] and 1 by Jindal et al. [4]. In addition to the similarities of abnormalities of the IgA immune system found in HIV-infected patients and in those with IgAN [5, 6], Warmold et al. [7] found higher levels of binding to matrix components of normal human kidney of serum IgA both from patients with IgA nephropathy and AIDS than from normal controls.

It must also be stressed that HIV-infected patients with IgAN were all Caucasian [Bargman, personal commun. for her patients], a finding in keeping with the rarity of primary IgAN in blacks. In this respect, one would like to know what was the ethnic origin of the patients of Béné et al. [1]. Referring to the absence of IgA mesangial deposits in the patients of Jackson et al. [6], one might assume that the majority of them were black since the authors are from Alabama.

In conclusion, though a coincidence cannot be definitely excluded, we think that Caucasian HIV-infected patients are at a higher risk for mesangial IgA deposition.

References

- Béné, M.-C.; Canton, P.; Amid, C.; May, T.; Faure, G.: Absence of mesangial IgA in AIDS: A postmortem study. *Nephron* 58: 240-241 (1991).
- Kenouch, S.; Delahousse, M.; Méry, J.Ph.; Nochy, D.: Mesangial IgA deposits in two patients with AIDS-related complex. *Nephron* 54: 338-340 (1990).
- Bargman, J.M.; Katz, A.; Miller, D.C.; Guo J.J.W.; Schoeneman, M.J.; Ghai, V.S.: IgA nephritis in HIV positive patients. A new AIDS nephropathy (abstract). *J. Am. Soc. Nephrol.* 7: 304 (1990).
- Jindal, K.K.; Trillo, A.; Bishop, G.; Hirsch, D.; Cohen, A.: Crescentic IgA nephropathy as a manifestation of human immune deficiency virus infection. *Am. J. Nephrol.* 77:147-150 (1991).
- Procaccia, S.; Lazzarin, A.; Colucci, A.; Gasparini, A.; Forcellini, P.; Lanzanova, D.; Uberti Foppa, C.; Novati, R.; Zanussi, C.: IgM, IgG and IgA rheumatoid factors and circulating immune complexes in patients with AIDS and AIDS-related complex with

serological abnormalities. Clin. exp. Immunol. 67:236-244(1987). Jackson, S.; Tarkowski, A.; Collins, J. E.; Dawson, L.M.; Schrohenloher R.E.; Kotler, D.P.; Koopman, W.J.: Occurrence of polymeric IgA rheumatoid factor in the acquired immune deficiency syndrome. J. clin. Immunol. 8:390-396 (1988). Warmold, A.; van den Wall Bake, L.; Gay, S.; Prince, S.; Julian, B.A.; Jackson, S.; Mestecky, J.: Binding of serum immunoglobulins in IgA nephropathy and AIDS (abstract). J. Am. Soc. Nephrol. 7:568(1990).

© 1992 S. Karger AG, Basel

0028-2766/92/

0614-0473\$2.75/0